

## PLACE OF BIRTH

1. County of Gila

District of \_\_\_\_\_

Town of Globe

or

City of Globe

## ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTHState Index No. 171

County Registrar No. \_\_\_\_\_

Local Registrar No. 288No. Rane

St. \_\_\_\_\_

Ward \_\_\_\_\_

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Gertrudes Molina

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

To be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other \_\_\_\_\_

6. Legitimate? \_\_\_\_\_

7. Date of birth Nov. 15th '25  
Month day year

5. No., in order of birth \_\_\_\_\_

## FATHER

Full name

Juan Molina

9. Residence

(Usual place of abode)

If nonresident, give place and state

Rane St.

10. Color or race

Mexican11. Age at last birthday 24 (Years)

12. Birthplace (city or place)

(State or country)

Penon Blanco  
Durango Mexico

13. Occupation

Nature of industry

Miner

14.

## MOTHER

Full maiden name

Emila Garcia Molina

15. Residence

(Usual place of abode)

If nonresident, give place and state

Rane St.  
Globe

16. Color or race

Mexican17. Age at last birthday 23 (Years)

18. Birthplace (city or place)

(State or country)

Penon Blanco  
Durango Mex

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein  
certified and including this child.)(a) Born alive and now living 3  
(b) Born alive but now dead no  
(c) Stillborn no21. Were precautions taken against oph-  
thalmia neonatorum?

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was born alive at 8 p. m. on the date above stated.  
(Born alive or stillborn.)\*When there was no attending physician or  
midwife, then the father, householder, etc.,  
should make this return. A stillborn child  
is one that neither breathes nor shows other  
evidences of life after birth.

Signature

Veronica Gutierrez

Address

Rane St Globe Ariz.

Given name added from

a supplemental report

Month, day, year.

Filed

19

Filed

19

Local Registrar.

County Registrar.

Registrar.

741-1115-541

N. 3.-in case of more than one child at a birth, a SEPARATE K-TURN must be made for each, and the number of each, in order of birth stated.